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INDICATION FORM**

Application Number	
Filing Date	
First Named Inventor	Sevic, Milan
Title	VANE PUMP WITH MOVABLE SLEEVE
Art Unit	
Examiner Name	
Attorney Docket Number	241190.17458

I hereby revoke all previous powers of attorney given in the above-identified application.

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☐ Practitioners associated with the Customer Number:

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Name	Registration Number
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Marvin H. Kleinberg	18402
Bradford E. Mattes	35862

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

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☒ Firm or Individual Name Kleinberg & Lerner, LLP

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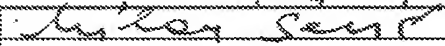
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I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/95)

SIGNATURE of Applicant or Assignee of Record

Signature		Date	27.07.2006
Name	Sevic, Milan	Telephone	
Title and Company			

(NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required. See below.)

☒ Total of 1 forms are submitted.

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